

B1 (Official Form 1)(1/08)

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Peterson, Aaron		Name of Joint Debtor (Spouse) (Last, First, Middle): Peterson, Dannielle
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): AKA Dannielle M Self		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): FKA Dannielle Marie Tkaczyk
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-9322		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-5765
Street Address of Debtor (No. and Street, City, and State): 25652 South Bridle Path Channahon, IL <div style="text-align: right; font-size: small;">ZIP Code 60410</div>		Street Address of Joint Debtor (No. and Street, City, and State): 25652 South Bridle Path Channahon, IL <div style="text-align: right; font-size: small;">ZIP Code 60410</div>
County of Residence or of the Principal Place of Business: Will		County of Residence or of the Principal Place of Business: Will
Mailing Address of Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input checked="" type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Peterson, Aaron

Peterson, Dannielle

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location

Where Filed: **Arizona**

Case Number:

0010358PHXRJH

Date Filed:

9/22/00

Location

Where Filed:

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

Case Number:

Date Filed:

- None -

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ Randolph M. Gordon

December 28, 2009

Signature of Attorney for Debtor(s)

(Date)

Randolph M. Gordon

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Peterson, Aaron
Peterson, Dannielle

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Aaron Peterson
Signature of Debtor **Aaron Peterson**

X /s/ Dannielle Peterson
Signature of Joint Debtor **Dannielle Peterson**

Telephone Number (If not represented by attorney)

December 28, 2009

Date

Signature of Attorney*

X /s/ Randolph M. Gordon
Signature of Attorney for Debtor(s)

Randolph M. Gordon
Printed Name of Attorney for Debtor(s)

Randolph M Gordon, Ltd.
Firm Name

220 W. Main St.
P.O. Box 547
Morris, IL 60450

Address

Email: rmgordonesq@sbcglobal.net

815-942-2554 Fax: 815-942-9212

Telephone Number

December 28, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X _____
Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D(Official Form 1, Exhibit D) (12/08)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Aaron Peterson
Dannielle Peterson**

Debtor(s)

Case No.
Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☐ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☒ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Aaron Peterson
 Aaron Peterson

Date: December 28, 2009

B 1D(Official Form 1, Exhibit D) (12/08)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Aaron Peterson
Dannielle Peterson**

Debtor(s)

Case No.
Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☐ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☒ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Danielle Peterson
Danielle Peterson

Date: December 28, 2009

Certificate Number: 02910-ILN-CC-007777617

CERTIFICATE OF COUNSELING

I CERTIFY that on July 23, 2009, at 12:50 o'clock PM EDT,

Dannielle Peterson received from

InCharge Education Foundation, Inc.,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Northern District of Illinois, an individual [or group] briefing that complied

with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: July 23, 2009

By /s/Gloria McCall-Russell

Name Gloria McCall-Russell

Title Certified Bankruptcy Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 02910-ILN-CC-007777652

CERTIFICATE OF COUNSELING

I CERTIFY that on July 23, 2009, at 12:52 o'clock PM EDT,

Aaron Peterson received from

InCharge Education Foundation, Inc.,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Northern District of Illinois, an individual [or group] briefing that complied

with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: July 23, 2009

By /s/Gloria McCall-Russell

Name Gloria McCall-Russell

Title Certified Bankruptcy Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Northern District of Illinois

In re **Aaron Peterson,
Dannielle Peterson**

Debtors

Case No. _____

Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	7,250.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		3,178.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	42		84,658.26	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			4,564.43
J - Current Expenditures of Individual Debtor(s)	Yes	1			0.00
Total Number of Sheets of ALL Schedules		54			
Total Assets			7,250.00		
Total Liabilities				87,836.26	

United States Bankruptcy Court
Northern District of Illinois

In re **Aaron Peterson,
Dannielle Peterson**

Debtors

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	4,564.43
Average Expenses (from Schedule J, Line 18)	0.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	5,757.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		3,178.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		84,658.26
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		87,836.26

B6A (Official Form 6A) (12/07)

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
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None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Furniture: entertainment center	J	300.00
		Furniture: 3 single beds	J	150.00
		Furniture: 3 dressers	J	250.00
		Furniture: desk	J	50.00
		Audio-Video: 4 tv	J	100.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothes: clothing for whole family	J	400.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			

Sub-Total > **1,250.00**
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

Sub-Total > **0.00**
(Total of this page)

Sheet 1 of 3 continuation sheets attached
to the Schedule of Personal Property

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		Auto: 2003, Ford, Focus, fare, 113,915	J	5,500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.		Animals: German Shepard	J	400.00
		Animals: 2 cats	J	100.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			

Sub-Total > **6,000.00**
(Total of this page)

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
35. Other personal property of any kind not already listed. Itemize.	WAGES OF DEBTORS		J	Unknown

Sheet 3 of 3 continuation sheets attached
to the Schedule of Personal Property

Sub-Total > **0.00**
(Total of this page)
Total > **7,250.00**

(Report also on Summary of Schedules)

B6C (Official Form 6C) (12/07)

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Household Goods and Furnishings</u>			
Furniture: entertainment center	735 ILCS 5/12-1001(b)	300.00	300.00
Furniture: 3 single beds	735 ILCS 5/12-1001(b)	150.00	150.00
Furniture: 3 dressers	735 ILCS 5/12-1001(b)	250.00	250.00
Furniture: desk	735 ILCS 5/12-1001(b)	50.00	50.00
Audio-Video: 4 tv	735 ILCS 5/12-1001(b)	100.00	100.00
<u>Wearing Apparel</u>			
Clothes: clothing for whole family	735 ILCS 5/12-1001(a)	400.00	400.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
Auto: 2003, Ford, Focus, fare, 113,915	735 ILCS 5/12-1001(c)	4,800.00	5,500.00
	735 ILCS 5/12-1001(b)	700.00	
<u>Animals</u>			
Animals: German Shepard	735 ILCS 5/12-1001(b)	400.00	400.00
Animals: 2 cats	735 ILCS 5/12-1001(b)	100.00	100.00
<u>Other Personal Property of Any Kind Not Already Listed</u>			
WAGES OF DEBTORS	735 ILCS 5/12-803, 740 ILCS 170/4	0.00	Unknown
	735 ILCS 5/12-1001(b)	0.00	

Total: **7,250.00** **7,250.00**

0 continuation sheets attached to Schedule of Property Claimed as Exempt

Debtors

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

3,178.00	3,178.00
3,178.00	3,178.00

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 405553 A.C.S.I - Revenue Mangement Corp. 520 Main St. Suite 202 Waltham, MA 02452-5549	H	9/25/2007 Medical Bill Hidden Lakes Dental Care				97.50
Account No. 257146-1 Advance Pay Systems, INC. 490 Wheeler Rd Suite 220 Hauppauge, NY 11788	H	5/4/2004 Student Loan professional education inst.				75.47
Account No. 003471309-01 AFNI 404 Brock Drive Bloomington, IL 61702-3517	W	2/15/2006 Utility Bill Dish Network				84.38
Account No. px33pdw Afni, Inc. 404 Brock Drive P.O. Box 3427 Bloomington, IL 61702-3427	H	1/27/2009 Utility Bill Alltel				480.33
Subtotal (Total of this page)						737.68

41 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 029507463-02 AFNI, Inc. 404 Brock Drive Bloomington, IL 61702-3427		1/27/2009 Utility Bill Qwest				206.00
Account No. Client Ref No 27630485 AlliedInterstate PO Box 361477 Columbus, OH 43236		11/2/2005 Utility Bill Direct TV				31.92
Account No. 3963967124 Amercian Medical Collection Agency PO Box 1235 Elmsford, NY 10523-0935		2/12/2007 Medical Bill quest diagnostics incorporated				41.00
Account No. 7703639067 American Medical Collection Agency 2269 S. Saw Mill River RD Bldg 3 Elmsford, NY 10523		4/30/2007 Medical Bill Quest Diagnostics				41.00
Account No. 01248 Anasazi Medical Clinic PC 2525 W Beryl Ave Phoenix, AZ 85201-1606		9/25/2006 Medical Bill				27.00
Sheet no. <u>1</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 346.92

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.
Account No. 779139-matna	W	10/6/2008 Medical Bill Morris Hospital				41.60
Anes Cons Of Morris LLC PO Box 88271 Chicago, IL 60680-1271						
Account No. cv200401493fd	J	9/7/2004 Judgment Lien Civil Claim Judgment				3,348.00
Apache Juntion Justice Court 150 N Ocotillo Dr Apache Junction, AZ 85220						
Account No. 190714287	H	9/9/2003 Other Bill				145.08
APS PO Box 2907 Phoenix, AZ 85062-2907						
Account No. 2966	H	7/22/2004 Medical Bill				56.18
Arizona Children's Surgery P.C PO Box 40487 Mesa, AZ 85274-0487						
Account No. 190714287	H	Opened 8/01/02 Last Active 7/09/03 Agriculture				145.00
Arizona Public Service Po Box 53999 Phoenix, AZ 85072						
Sheet no. 2 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						3,735.86

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C					DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.
Account No. 269121287	H	Opened 6/01/95 Last Active 12/01/99 Agriculture				0.00	
Arizona Public Service Po Box 53999 Phoenix, AZ 85072							
Account No. 19071....	H	8/2002 Other Bill				145.00	
Arizona Public Services Po Box 53999 Phoenix, AZ 85072							
Account No. 5178007563304955	W	9/18/2008 Credit Card Premier Bankcard, INC				466.77	
ARM accounts receivable management, Inc. PO Box 129 Thorofare, NJ 08086-0129							
Account No. 1002033451	H	Opened 7/01/06 CollectionAttorney Midwest Ear Nose Throat Con				92.00	
Armor Systems Co 1700 Kiefer Dr Suite 1 Zion, IL 60099							
Account No. 002033451-14	H	9/8/2006 Medical Bill midwest ear, nose & throat consultants				92.97	
Armor Systems Corporation 2322 N Green Bay RD Waukegan, IL 60087-4209							
Sheet no. 3 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	796.74

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 085700000992026815 Assest Acceptance LLC PO Box 2036 Warren, MI 48090-2036		W	5/16/2006 Utility Bill at&t				641.43
Account No. Client Account # 0041911744005 Asset Acceptance LLC San Antonio, TX		H	1/2/2007 Other Bill Ballys asset acceptance LLC ACct # 1536441 1-800-525-9033				926.31
Account No. 587320 Associated Radiologists, LTD PO Box 98311 Phoenix, AZ 85072		H	3/11/2004 Medical Bill				76.00
Account No. 9439335 Associated Recovery Systems P.O Box 469046 Escondido, CA 92046-9046		H	2/22/2006 Credit Card Capital One F.S.B. acct 4121742385138790				641.41
Account No. 122765 ATG Credit, LLC PO Box 14895 Chicago, IL 60614-4523		W	Medical Bill Naperville Radiologists				28.80
Sheet no. 4 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							2,313.95

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 0046 8426 8125 Bank Of Amercia 100 N. Broadway St. Louis, MO 63102-2738	J	2/5/2009 Bank Overdraft overdrawn				977.88
Account No. 18014241 BANNER BAYWOOD MED CENTER P O BOX 6239 Mesa, AZ 85216-6239	J	4/1/2003 MED SERVICES				200.00
Account No. 05-017258-20410901321-00 C/O Credit Protection Assoc PO Box 802068 Dallas, TX 75380-2068	H	3/12/2008 Other Bill Blockbuster				92.84
Account No. 12717507 Calvalry Portfolio services, LLC PO Box 27288 Tempe, AZ 85285-7288	H	4/7/2009 Utility Bill sprint				894.07
Account No. 12717507 Calvary Portfolio Services Attention: Bankruptcy Department Po Box 1017 Hawthorne, NY 10532	H	Opened 3/01/08 Collection Attorney Sprint Pcs				904.00
Sheet no. 5 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						3,068.79
Subtotal (Total of this page)						3,068.79

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 028062-00 Camelback Anesthesia PO Box 81349 Phoenix, AZ 85069-1349	H	3/24/2004 Medical Bill				640.00
Account No. 028062-00 Camelback Anesthesia PLLC PO Box 81349 Phoenix, AZ 85069-1349	H	5/4/2004 Medical Bill				128.00
Account No. 028062-00 Camelback Anesthesia PLLC PO Box 81349 Phoenix, AZ 85069-1349	H	8/5/2004 Medical Bill				128.00
Account No. 529107172025 Cap One Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091	H	Opened 10/01/99 Last Active 8/01/00 CreditCard				0.00
Account No. 115893673 Cbe Group 131 Tower Park Dr Suite 100 Waterloo, IA 50704	H	Opened 2/01/09 CollectionAttorney Comed Residential D				593.00
Sheet no. <u>6</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,489.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. C54594C54594 Cda/pontiac Attn: Bankruptcy Po Box 213 Sreator, IL 61364	J	Opened 12/01/06 Collection Attorney Joliet Fire Department				450.00
Account No. C54594E15574 Cda/pontiac Attn: Bankruptcy Po Box 213 Sreator, IL 61364	J	Opened 9/01/08 Collection Attorney Phys. Of Morris Hosp.				305.00
Account No. D49846E15579 Cda/pontiac Attn: Bankruptcy Po Box 213 Sreator, IL 61364	H	Opened 9/01/08 Collection Attorney Phys. Of Morris Hosp.				131.00
Account No. Control # 174771642 Certegy Payment Recovery Services, Inc 3500 5th st Northport, AL 35476	W	1/18/2007 Other Bill Jewel Check bounced in my bank account				196.09
Account No. 028941 Certified Services Inc PO Box 177 Waukegan, IL 60079-0177	W	3/22/2007 Medical Bill Oakbrook Allergists				501.00
Sheet no. <u>7</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,583.09

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 28941B Certified Services Inc Po Box 177 Waukegan, IL 60079	J	Opened 1/01/07 Collection Attorney Oakbrook Allergists				501.00
Account No. 037388-00 Chandler Family Pract 1076 W. Chandler Blvd. # 113 Chandler, AZ 85225	H	9/4/2003 Medical Bill				15.00
Account No. 037388-00 Chandler Family Practice 1076 W. Chandler Blvd. #113 Chandler, AZ 85224	H	3/26/2004 Medical Bill				15.00
Account No. PETDA001 Chicago Osteopathic Healthcare 6715 Kingery HWY Willowbrook, IL 60527-5141	W	2/9/2009 Medical Bill				200.00
Account No. 00060007862PO City of Joliet Fire Department 150 West Jefferson Street Joliet, IL 60432-4156	W	9/17/2006 Medical Bill Ambulance			X	450.00
Sheet no. 8 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,181.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. dr2000-092300 Clerk of the Superior Court PO Box 53236 Phoenix, AZ 85072	H	12/1/2003 Court Fees				166.00
Account No. 9751108 Collection Company Of 700 Longwater Dr Norwell, MA 02061	J	Opened 1/01/08 Collection Attorney Village Of Bolingbrook/Red Spe				150.00
Account No. l100ban1302043713 Collection service Bur PO Box 310 Scottsdale, AZ 85252	W	5/2005 Medical Bill Banner Baywood Medical Center				100.00
Account No. l100BAN1302043713 Collection Service Bur Po Box 310 Scottsdale, AZ 85252	H	Opened 5/01/05 Collection Attorney Banner Baywood Medical Center				100.00
Account No. 608850030007 Conseco Finance Attn: Bankruptcy P.O. Box 103106 Roswell, GA 30076	J	Opened 1/01/97 Last Active 9/01/00 Unsecured				Unknown
Sheet no. 9 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						516.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 0018501151646901 Cox Communications PO Box 78071 Phoenix, AZ 85062-8071	H	10/9/2005 Utility Bill				135.08
Account No. 2053531777 Credit Control Corp 11821 Rock Landing Drive Newport News, VA 23606	H	12/2005 Utility Bill Cox Communications				178.00
Account No. 2053531777 Credit Control Corp 11821 Rock Landing Dr Newport News, VA 23606	H	Opened 12/01/05 CollectionAttorney Cox Communications Phoenix Az				178.00
Account No. 39555573 Credit Management 4200 International Pwy Carrolton, TX 75007	H	Opened 3/01/09 CollectionAttorney Comcast Chicago Seconds - 2000				298.00
Account No. 10147220 Credit Management Cont Po Box 1654 Green Bay, WI 54305	H	Opened 8/01/07 CollectionAttorney II Energy Savings Corp Db U.S				1,006.00
Sheet no. <u>10</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,795.08

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 10147220 Credit Management Control, INC PO Box 1654 Green Bay, WI 54305-1654	H	5/24/2007 Utility Bill Illinois energy savings corp				1,310.71
Account No. BLOCKBUSTER 17258 CREDIT pROTECTION aSSOC P O BOX 802068 Dallas, TX 75380-2068	J	VIDEO RENTAL				92.84
Account No. 01-020000-8798201430577539 Credit Protection Association, L.P 13355 Noel RD Dallas, TX 75240	H	03/03/2008 Utility Bill Comcast PO Box 3002 Southeastern, PA 19398-3002				348.00
Account No. d49846e15579 Creditors Discount & Aud 415 E Main St Streator, IL 61364	W	Medical Bill Phys of Morris Hospital				131.00
Account No. FH0000029505 Creditors Discount & Audit Co. PO Box 213 415 E. Main St Streator, IL 61364-0213	H	9/30/2008 Medical Bill Phys of Morris Hosp				131.00
Sheet no. <u>11</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						2,013.55
Subtotal (Total of this page)						2,013.55

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. e15574-c54594 Creditors Discount & Audit CO. 415 E. Main ST PO Box 213 Streator, IL 61364-0213	W	9/30/2008 Medical Bill phys of morris hosp				305.00
Account No. e99160-e00996 Creditors Discount & Audit Co. P O Box 213 Streator, IL 61364	J	E R physicians				349.00
Account No. 8441860 E R Solutions, Inc 500 SW 7th St. #A100 PO Box 9004 Renton, WA 98057	J	12/13/2003 Utility Bill Qwest				229.12
Account No. E035212588 Edward Hospital & Health Services PO Box 4207 Carol Stream, IL 60197-4207	H	10/25/2005 Medical Bill				250.00
Account No. E035645886 Edward Hospital & Health Services PO Box 4207 Carol Stream, IL 60197	H	3/9/2006 Medical Bill				16.77
Sheet no. <u>12</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,149.89

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 2003016844 Emcc, INC., Servicer of your Midland Cre PO Box 9607 Manchester, NH 03108-9607	H	4/24/2005 Other Bill				275.00
Account No. 636802 Emergency Physicians Professional Assoc 5001 West 80th st #300 Bloomington, MN 55437-1114	H	2/21/2003 Medical Bill				215.00
Account No. EPI 77988 Epic Group, S.C. PO Box 66973 Slot 303125 Chicago, IL 60666-0973	H	2/17/2008 Medical Bill Morris Hospital				30.80
Account No. EPI 88551 Epic Group, S.C. PO Box 66973 Slot 303125 Chicago, IL 60666-0973	J	7-13-09				184.43
Account No. EPI 86408 Epic Group, S.C. PO Box 66973 Slot 303125 Chicago, IL 60666-0973	J					349.00
Sheet no. <u>13</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,054.23

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 490130515 ER Solutions, Inc PO Box 6030 Hauppauge, NY 11788-0154	W	11/4/2008 Utility Bill T Mobile				903.39
Account No. 567137-3 First Financial Asset Management, INC. PO Box 6887 Miramar Beach, FL 32550	H	2/27/2004 Other Bill Arizona Public service Company				145.08
Account No. 5178007563304955 First Premier Bank Po Box 5524 Sioux Falls, SD 57117	J	Opened 9/01/06 Last Active 5/27/07 CreditCard				466.00
Account No. 604589102267 GEMB / Mervyns Attention: Bankruptcy Po Box 103106 Roswell, GA 30076	H	Opened 12/19/95 Last Active 10/23/08 ChargeAccount				0.00
Account No. 579796 Gemb/jcp Attention: Bankruptcy Po Box 103106 Roswell, GA 30076	J	Opened 12/10/96 Last Active 4/01/97 ChargeAccount				0.00
Sheet no. 14 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,514.47

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 007-086042-11 Global Financial INC. PO Box 5066 Timonium, MY 21094-5066	H	4/5/2007 Other Bill				267.00
Account No. 111266 Grand Dental Associates, P.C. 3322 Solutions Center Chicago, IL 60677-3003	W	2/2/2009 Medical Bill				102.38
Account No. 001515913 Grant & Weber 14795 N 78th way ste 800 Scottsdale, AZ 85260	W	5/2003 Medical Bill chandler regional hospital				52.92
Account No. 001605539 Grant & Weber 14795 N 78th way ste 800 Scottsdale, AZ 85260	W	Medical Bill Chandler Regional Hospital				263.14
Account No. 001605539 Grant & Weber 14795 N 78th Way Ste 800 Scottsdale, AZ 85260	H	Opened 7/01/03 CollectionAttorney Chandler Regional Hospital				250.00
Sheet no. 15 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 935.44

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 002637266 Grant & Weber 14795 N 78th Way Ste 800 Scottsdale, AZ 85260	H	Opened 5/01/05 CollectionAttorney Chandler Regional Hospital				125.00
Account No. 001515913 Grant & Weber 14795 N 78th Way Ste 800 Scottsdale, AZ 85260	H	Opened 5/01/03 CollectionAttorney Chandler Regional Hospital				50.00
Account No. 001739517 Grant & Weber 14795 N 78th Way Ste 800 Scottsdale, AZ 85260	H	Opened 10/01/03 CollectionAttorney Chandler Regional Hospital				50.00
Account No. chw040/263726-6/a95 Grant & Weber Arizona, Inc 14795 N 78th Way Suite 800 Scottsdale, AZ 85260	H	6/16/2005 Medical Bill chandler regional hospital				130.61
Account No. chw040/173951-7/a93 Grant & Weber Arizona, Inc 14795 North 78th Way Suite 800 Scottsdale, AZ 85260	H	11/17/2003 Medical Bill chandler regional hospital				52.92
Sheet no. 16 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 408.53

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. CHW040/263726-6/A95 Grant & Weber Arizona, INC. 14795 North 78th Way Suite 800 Scottsdale, AZ 85260	H	Medical Bill Chandler Regional Hospital				134.72
Account No. zzzzzz/169462-5/A92 Grant & Weber Arizona, INC. 14795 North 78th Way Suite 800 Scottsdale, AZ 85260	H	4/30/2004 Medical Bill Chandler Region Hospital				337.94
Account No. ZZZZZZ/169462-5/A25 Grant & Weber Arizona, Inc. 14795 North 78th Way Suite 800 Scottsdale, AZ 85244	H	12/16/2003 Medical Bill				326.69
Account No. 160553-9 Grant & weber Arizona, Inc. 14795 N 78th Way Suite 800 Scottsdale, AZ 85260	H	8/14/2003 Medical Bill Chandler Regional Hospital				263.14
Account No. 19-986548 Grundy Radiologists, INC. PO Box 5997 Dept 7014 Carol Stream, IL 60197-5997	W	4/10/2008 Medical Bill				41.40
Sheet no. <u>17</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,103.89

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 986420 Grundy Radiologists, Inc. PO Box 5997 Dept 7014 Carol Stream, IL 60197-5997	H	3/31/2009 Medical Bill				44.00
Account No. CV04-06779RA Hammerman & Hultgren PC 3101 North Central STE 500 Phoenix, AZ 85012	W	10/04/2004 Garnishment Rancho Santa FE Thrift & Loan Association.				0.00
Account No. 11134150 Harvard Collection Services, Inc. 4839 N. Elston Avenue Chicago, IL 60635-2534	H	3/3/2008 Utility Bill Com ED				593.84
Account No. 876037 Healthcare Coll Inc 2432 W Peoria ave #4-10 Phoenix, AZ 85209	W	Medical Bill banner baywood medical ctr				50.00
Account No. A37217 Healthcare Coll Inc 2432 W Peoria Ave # 4-10 Phoenix, AZ 85029	J	Opened 4/01/04 CollectionAttorney Banner Baywood Medical Ctr				200.00
Sheet no. 18 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 887.84

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. A70457						
Healthcare Coll Inc 2432 W Peoria Ave # 4-10 Phoenix, AZ 85029		H	Opened 7/01/04 CollectionAttorney Banner Baywood Medical Ctr			100.00
Account No. A90780						
Healthcare Coll Inc 2432 W Peoria Ave # 4-10 Phoenix, AZ 85029		H	Opened 9/01/04 CollectionAttorney Banner Baywood Medical Ctr			100.00
Account No. C27405						
Healthcare Coll Inc 2432 W Peoria Ave # 4-10 Phoenix, AZ 85029		H	Opened 11/01/05 CollectionAttorney Banner Health-Desert			100.00
Account No. A02458						
Healthcare Coll Inc 2432 W Peoria Ave # 4-10 Phoenix, AZ 85029		H	Opened 12/01/03 CollectionAttorney Banner Baywood Medical Ctr			50.00
Account No. c27405						
Healthcare Collections Inc. P.O Box 82910 Phoenix, AZ 85071-2910		H	12/5/2005 Medical Bill Desert Samaritan Hospital			100.00
Sheet no. 19 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						450.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. a70457 Healthcare Collections Inc. PO Box 82910 Phoenix, AZ 85071	H	8/20/2004 Medical Bill Banner Baywood Medical CTR				100.00
Account No. a37217 Healthcare Collections Inc. PO Box 82910 Phoenix, AZ 85071-2910	W	5/26/2004 Medical Bill Banner Baywood Medical CTR				200.00
Account No. a02458 Healthcare Collections Inc. PO Box 82910 Phoenix, AZ 85071-2910	H	1/16/2004 Medical Bill Banner baywood medical ctr				50.00
Account No. a90780 Heathcare Coll Inc 2432 W Peoria ave # 4-10 Phoenix, AZ 85209	W	Medical Bill Banner Baywood Medical CTR				100.00
Account No. 675800 Hidden Lakes Dental Care, P.C 680 W. Boughton Rd suite 100 Bolingbrook, IL 60440	H	6/25/2007 Medical Bill				70.00
Sheet no. 20 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 520.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 0000006431 HOWD Medical LLC 271 N. Main ST. Seneca, IL 61360	W	1/29/2009 Medical Bill				55.00
Account No. 6431 Howd medical LLC P O Box200 Seneca, IL 61360	J	2/08 -3/08 med treatment				55.00
Account No. 548897500157 HSBC Bank PO Box 5253 Carol Stream, IL 60197	W	Other Bill				1,016.00
Account No. 09-0637262-8 Illinois Amercian Water PO Box 578 Alton, IL 62002-0578	H	11/21/2007 Utility Bill				856.83
Account No. 28224351 Integrity Financial Parners, Inc PO Box 11530 Overland Park, KS 66207-4230	H	2/18/2009 Other Bill				315.00
Sheet no. 21 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 2,297.83

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 196838251769 J R Brothers Finance I 10000 N 31st Ave Ste D20 Phoenix, AZ 85051	J	Opened 6/01/05 Collection Attorney Wong Md Pb Sheila				140.00
Account No. 2333585 Jnr Adjustment Company P.o. Box 27070 Minneapolis, MN 55427	J	Opened 12/01/04 Returned Check Honey Baked Ham #52/2				58.00
Account No. 119 JNR adjustment Company Inc PO Box 27070 Minneapolis, MN 55427-0070	W	12/8/2004 Other Bill				58.29
Account No. 196838251769 JR Brothers Finance INC 10000 N 31st Ave Ste D20 Phoenix, AZ 85051	J	7/12/2005 Medical Bill sheila wong md				140.00
Account No. 006058955 KCRC PO Box 30650 Salt Lake City, UT 84130-0650	W	4/21/2007 Other Bill Returned Check				93.95
Sheet no. 22 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 490.24

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. D663921N1	H	05 Cableamerica Corp				592.00
Kenneth Eise 777 E Missouri Ave Ste 1 Phoenix, AZ 85014						
Account No. D729604N1	J	Opened 9/01/05 CollectionAttorney Cableamerica Corp				90.00
Kenneth Eisen & Assoc 777 E Missouri Ave Ste 1 Phoenix, AZ 85014						
Account No. 133206	H	11/3/2004 Utility Bill Cableamerica Corp				592.03
Kenneth, Eisen & Associates, Ltd PO Box 7370 Phoenix, AZ 85011-7370						
Account No. 152350	W	9/8/2005 Utility Bill cableamercia corp				90.27
Kenneth, Eisen & Associates, LTD PO box 7370 Phoenix, AZ 85011-7370						
Account No. cr05000804a	W	3/12/2007 Court Fees East Mesa Justice Court				53.55
LDC Collection Systems PO Box 52030 Phoenix, AZ 85072-2030						
Sheet no. <u>23</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,417.85

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. dr2000092300 LDC Collection Systems PO Box 52110 Phoenix, AZ 85072-2110	H	5/17/2004 Court Fees Clerk of Maricopa County Superior Court				197.54
Account No. E64 2003026844 LTD Financial Services, L.P. 7322 Southwest Freeway Suite 1600 Houston, TX 77074	H	7/25/2005 Other Bill				540.99
Account No. 345692 M&M Orthopaedics LTD 4115 Fairview AVE Downers Grove, IL 60515	W	5/10/2006 Medical Bill				384.00
Account No. 197195 Maricopa County Attorney 100 West Washington Street Suite 2000 Phoenix, AZ 85003-0014	W	9/5/2005 Other Bill overdrawn check bounced				266.84
Account No. 4519 Mark Gentile MD 908B W Chandler BLVD #4 Chandler, AZ 85225	H	1/16/2004 Medical Bill				263.00
Sheet no. 24 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,652.37

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 4519		11/07/2003				
Mark Gentile MD 908B W Chandler BLVD #4 Chandler, AZ 85225	H	Medical Bill				81.00
Account No. 4364		12/5/2003				
Mark Gentile MD 908B W Chandler BLVD #4 Chandler, AZ 85225	H	Medical Bill				304.00
Account No. 5514.....		Car Loan				
Marquette Consumer Finance 3033 Campus Drive Ste N150 Plymouth, MN 55441	J					3,178.00
Account No. V1067995		4/01/200-4/25/2000				
Master Financial Group, INC. PO Box 28317 Tempe, AZ 85285-8317	H	Medical Bill Chandler Regional Hospital				1,478.26
Account No. P000005063		12/12/2008				
Medical Business Bureau, LLC 1175 Devin DR, STE 173 Norton Shores, MI 49441	W	Medical Bill Grundy Radiologists INC.				51.80
Sheet no. 25 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						5,093.06

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 8080921275	H		Med1 02 Edward Hospital				1,139.00
Merchants Cr 223 W Jackson St Chicago, IL 60606							
Account No. 8071551428	H		Med1 02 Edward Hospital				255.00
Merchants Cr 223 W Jackson St Chicago, IL 60606							
Account No. 8071221744	H		Med1 02 Edward Hospital				250.00
Merchants Cr 223 W Jackson St Chicago, IL 60606							
Account No. 8073371112	H		Med1 02 Edward Hospital				133.00
Merchants Cr 223 W Jackson St Chicago, IL 60606							
Account No. 8072140439	H		Med1 02 Edward Hospital				100.00
Merchants Cr 223 W Jackson St Chicago, IL 60606							
Sheet no. 26 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							1,877.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C					DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.
Account No. 08-080921275	H	5/15/2008 Medical Bill Edward Hospital				1,139.75	
Merchants Credit Guide Co. 223 W. Jackson BLVD Chicago, IL 60606							
Account No. 08-073371112	H	1/16/2008 Medical Bill Edward Hospital				133.34	
Merchants Credit Guide Co. 223 W. Jackson BLVD Chicago, IL 60606							
Account No. 08-072140439	H	11/1/2007 Medical Bill Edward Hospital				350.00	
Merchants Credit Guide Co. 223 W. Jackson BLVD Chicago, IL 60606							
Account No. 125122	J	3/16/2006 Medical Bill				41.24	
Metro Inf. DIS. Consultants, LLC 500 E Ogden Ste C Hinsdale, IL 60521-2480							
Account No. 200301	H	Opened 3/17/03 Last Active 2/09/04				0.00	
Midland Cred Po Box 6241 Sioux Falls, SD 57117							
Sheet no. 27 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	1,664.33

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C					DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.
Account No. 850423...	W	Other Bill Household/arbor				1,017.00	
Midland Credit MGMT 8875 Aero Drive San Diego, CA 92123							
Account No. 87298	H	3/29/2006 Medical Bill				630.00	
Midwest Ear, Nose & Throat Consultants, 503 Thornhill Drive Carol Stream, IL 60188-2780							
Account No. 5833109	J	Morris Hospital				201.68	
Miramed Revenue group LLC Dept 77304 P O Box 77000 Detroit, MI 48277-0304							
Account No. DD0010732069	H	8/28/2008 Medical Bill Morris Hospital				14,404.92	
MiraMed Revenue Group, LLC P.O Box 77000 Dept 77304 Detroit, MI 48277-0304							
Account No. DD0010732069	H	2/23/2008 Medical Bill Morris Hospital				934.51	
MiraMed Revenue Group, LLC PO Box 536 Linden, MI 48451-0563							
Sheet no. 28 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	17,188.11

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Dd0010713739 MiraMed Revenue Group, LLC PO Box 536 Linden, MI 48451-0536	H	9/11/2008 Medical Bill Morris Hospital				593.00
Account No. 5515182 Miramed revenue Group, LLC Dept 77304 P O Box 77000 Detroit, MI 48277-0304	J	Morris Hospital				1,584.71
Account No. dd0010847334 Morris Hospital 150 West High Street Morris, IL 60450	H	1/5/2009 Medical Bill				57.20
Account No. DD0010917122 Morris Hospital 150 West High Street Morris, IL 60450	J	7-13-09 med care				210.51
Account No. DD0010881067 Morris Hospital 150 West High Street Morris, IL 60450	J	4-06-09				144.48
Sheet no. 29 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						2,589.90
Subtotal (Total of this page)						2,589.90

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. dd0010881067						
Morris hospital business office 150 W High Street Morris, IL 60450-1497		H	4/06/2009 Medical Bill			144.48
Account No. 118623						
Naperville Radiologists S.C. 6910 S Madison St Willowbrook, IL 60527-5504		H	1/24/2006 Medical Bill			6.64
Account No. 122765						
Naperville Radiologists S.C. 6910 S Madison ST Willowbrook, IL 60527-5504		H	7/31/2006 Medical Bill			352.00
Account No. 122765						
Naperville Radiologists S.C. 6910 S Madison St Willowbrook, IL 60527		W	8/2/2006 Medical Bill This is a bill that was a partial to another bill that was previously added on another creditor I added			11.00
Account No. 667832213						
NCO Fin/99 PO Box 15636 Wilmington, DE 19850		W	Utility Bill Salt River Project			60.00
Sheet no. 30 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						574.12

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 8824871100 NCO Financial Systems INC PO Box 15630 Dept 99 Wilmington, DE 19850	W	11/3/2007 Other Bill BMG musice Service				32.13
Account No. 4121901969 NCO Financial Systems Inc PO Box 15740 Wilmington, DE 19850-5740	H	12/8/2007 Utility Bill Nicor Gas				248.15
Account No. 991972 NCO Financial Systems Inc PO Box 15740 Wilmington, DE 19850-5740	H	3/12/2008 Utility Bill Nicor energy Services				31.32
Account No. 3113759322 Newport News Po Box 182124 Columbus, OH 43218	J	Opened 10/01/95 Last Active 10/01/01 ChargeAccount				0.00
Account No. 412190 Nicor Gas Attention: Bankruptcy Department 1844 Ferry Road Naperville, IL 60507	H	Opened 11/09/05 Last Active 3/07/07 Agriculture				230.00
Sheet no. 31 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 541.60

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. f31384589			1/14/2009				
Northland Group INC. PO Box 390864 Edina, MN 55439		H	Store Card Capital One/Best Buy				
							189.38
Account No. 133574806			1/12/2007				
Omnium Worldwide, INC PO Box 95684842 St. Louis, MO 63195		H	Utility Bill Qwest Communications				
							238.32
Account No. 4677563			Med1 02 Morris Hospital				
Pellettieri 991 Oak Creek Dr Lombard, IL 60148		H					
							935.00
Account No. 1340296			10/18/2007				
Penn Credit Corporation PO Box 988 Harrisburg, PA 17108-0988		H	Utility Bill At&t wirelss Service				
							493.20
Account No. PETAA000			11/07/2008				
Peter analytis/Joliet Headache 801 North Larkin AVE suite 103 Joliet, IL 60435		H	Medical Bill				
							137.80
Sheet no. 32 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							1,993.70

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 11798215 Phillips & Cohen Associates, Ltd 258 Chapman RD Suite 205 Newark, DE 19702	H	07/03/2008 Utility Bill American Water				578.58
Account No. 5-491770 Pinnacle Financial Group, INC. 7825 Washington Ave South Suite 410 Minneapolis, MN 55439	J	2/5/2003 Medical Bill Suburban Radiological Consult				28.00
Account No. Q5500-286561 Progressive Medical Associates PO Box 7127 Phoenix, AZ 85011	H	8/1/2005 Medical Bill Unite Health Care PO Box 30555 Salt Lake City, UT 84130				335.00
Account No. 025517 Pueblo Pediatrics LTD 2152 S. Vineyard Mesa, AZ 85210	H	10/24/2003 Medical Bill				5.00
Account No. 3963967124 Quest Diagnostics PO Box 64804 Baltimore, MD 21264-4804	W	8/16/2006 Medical Bill				41.00
Sheet no. 33 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						987.58
Subtotal (Total of this page)						987.58

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 004674686513 Reliable Adjustment Bureau INC 2655 A Park Center Drive Chandler, AZ 85225-1735		H	4/30/2003 Other Bill				105.12
Account No. 3832138 Revenue Production Management, INC PO Box 673775 Detroit, MI 48267-3775		H	7/13/2007 Medical Bill Edward Hospital				1,275.50
Account No. E035334168 Revenue Production Management, Inc PO Box 830913 Birmingham, AL 35283-0913		H	6/5/2006 Medical Bill Edward Hospital				250.00
Account No. E037939253 Revenue Production Management, Inc PO Box 830913 Birmingham, AL 35283-0913		W	12/4/2006 Medical Bill Edward Hospital				255.05
Account No. E035212588 Revenue Production Management, Inc. PO Box 830913 Birmingham, AL 35283-0913		H	3/2/2006 Medical Bill Edward Hospital				250.00
Sheet no. 34 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							2,135.67
Subtotal (Total of this page)							2,135.67

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. E035323856 Revenue Production Management, Inc. PO Box 830913 Birmingham, AL 35283-0913	H	4/21/2006 Medical Bill Edward Hospital				100.00
Account No. 4056714 Revenue Production Mgmt PO Box 77000 Dept 77308 Detroit, MI 48277-0308	H	12/12/2007 Medical Bill Edward Hospital				1,297.50
Account No. 20333279 riddle & wood, P. C PO Box 1187 Sandy, UT 84091-1187	H	9/26/2008 Credit Card				877.80
Account No. 5509441770 RJM Acquistions LLC PO Box 18006 Hauppauge, NY 11788-8806	J	1/16/2009 Bank Overdraft Wells Fargo Bank Checking Acct-overdrawn				148.68
Account No. 1005714120 RJM Acquistions LLC PO Box 18006 Hauppauge, NY 11788-8806	H	4/22/2008 Bank Overdraft Bank Of America				105.12
Sheet no. 35 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						2,529.10

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. 12129		H	6/7/2008 Medical Bill				38.74	
Robert J Millar MD 1315 Macom Dr Suite 203 Naperville, IL 60564								
Account No. 12132		H	1/5/2008 Medical Bill				13.20	
Robert J Millar MD 1315 Macom Dr Suite 203 Naperville, IL 60564								
Account No. 12427		W	6/7/2008 Medical Bill				302.40	
Robert J Millar MD 1315 Macom Dr Suite 203 Naperville, IL 60564								
Account No. 306-111267		W	3/31/2009 Medical Bill grand dental associates regarding Tyler Peterson and Kaylee Peterson				103.90	
Robert R Mucci PO Box 190 West Chicago, IL 60186								
Account No. 306-111267		J	grand dental				69.90	
Robert R. Mucci P O Box 190 West Chicago, IL 60186								
Sheet no. 36 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	528.14

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 306-111268 Robert R. Mucci P O Box 190 West Chicago, IL 60186	J	grand dental				34.00
Account No. 7373806 RPM Receivables Performance Management 1930 220th St SE Suite 101 Bothell, WA 98021	H	2/10/2005 Other Bill Sherman Acquistition L.L.C				541.08
Account No. 200300004370 San Marcos Justice Court 201 E Chicago St Chandler, AZ 85225	J	7/17/2003 Judgment Lien civil claim judgment palm trails apt.				1,007.00
Account No. Ref # 40751 Scottsdale Collection Services, LLC 7900E Greenway Rd # 201 Scottsdale, AZ 85260-1715	H	10/8/2004 Medical Bill Mark H Wilson				15.17
Account No. 5136199 Southwest Ambulance PO Box 52793 Phoenix, AZ 85072	H	11/16/2005 Medical Bill invoice number 3875970				129.31
Sheet no. 37 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,726.56

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 5323481 Tate & Kirlin Associates 2810 Southampton Road Philadelphia, PA 19154	W	1/18/2006 Other Bill Emcc linc				529.88
Account No. 5834743 Tate & Kirlin Associates 2810 Southampton RD Philadelphia, PA 19154	H	7/3/2006 Other Bill				540.99
Account No. PETAA000 Timothy Walker, M.D 1501 N Gilbert RD Suite 120 Gilbert, AZ 85243-2393	H	8/26/2005 Medical Bill				20.00
Account No. PETAAOOO Timothy Walker, M.D. 1501 N Gilbert RD Suite 120 Gilbert, AZ 85243	H	6/6/2005 Medical Bill				95.12
Account No. 5870m-0021394165 Transworld Systems PO Box 1864 Santa Rosa, CA 95402	W	9/25/2008 Medical Bill Lakeside Family Practice 1315 Macom Drive # 203 Naperville, IL 60564				354.34
Sheet no. 38 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,540.33

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 3417005177605 TRS Recovery Services, INC 5251 Westheimer Houston, TX 77056	W	3/27/2003 Other Bill Safeway of returned check				25.00
Account No. 812552073 Trustmark Recovery Services 541 Otis Bowen Munster, IN 46321	W	1/20/2009 Medical Bill University of Chicago Hospitals				1,042.42
Account No. 940813-3002325 Trustmark Recovery Services 541 Otis Bowen Munster, IN 46321	W	1/20/2009 Medical Bill University of chicago physician's group				153.60
Account No. 082030191 Trustmark Recovery services 541 Otis Bowen Drive Munster, IN 46321	W	4/21/2009 Medical Bill University of Chicago Pysician's Group and University of Chicago Hospitals				1,196.02
Account No. 00130986 U.S. Collections West, Inc. P.O Box 39695 Phoenix, AZ 85069	J	11/17/2003 Rent Autumn Creek/Bamsi				377.12
Sheet no. 39 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						2,794.16

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 17250182 United Collect Bur Inc 5620 Southwyck Blvd Ste Toledo, OH 43614	J	Opened 9/01/06 CollectionAttorney Meijer Inc				120.00
Account No. 20060727 0857 United Collection Bureau, INC 5620 Southwyck Blvd Suite 206 Toledo, OH 43614	W	9/26/2006 Other Bill Meijer inc				119.66
Account No. 7230360000154131 US Collections West Inc PO Box 39695 Phoenix, AZ 85069	W	8/2003 Rent PALM TRAILS APTS				5,032.00
Account No. 810360028090 Usa Credit 1 Millennium Dr Uniontown, PA 15401	J	Opened 9/08/06 Last Active 9/01/06 CreditCard				0.00
Account No. 01490-007115 Valley Collection Service PO Box 520 Glendale, AZ 85311-0520	H	5/7/2003 Court Fees Gilbert Municipal Court				1,081.50
Sheet no. 40 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 6,353.16

B6F (Official Form 6F) (12/07) - Cont.

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 01490-007115 Valley Collection Services PO Box 520 Glendale, AZ 85311-0520	H	5/7/2003 Other Bill Gilbert Municipal Court is mentioned on bill statement				1,081.50
Account No. 						
Account No. 						
Account No. 						
Account No. 						
Sheet no. 41 of 41 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,081.50
			Total (Report on Summary of Schedules)			84,658.26

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Jason Buendgen 43 Foxcroft Road Naperville, IL 60565	Lessee on Lease Rent on Residence
La Fitness 1745 Route 59 Plainfield, IL 60586	Purchaser on Contract f4933722 signed 12/04/2008 expires 2/20/2009
Marquette Consumer Finance P.O. Box 5004 Westfield, IN 46074	Purchaser on Contract 2003 Ford Focus
Verizon 777 Big Timber Road Elgin, IL 60123	Purchaser on Contract 485755667-00001

In re **Aaron Peterson,
Dannielle Peterson**

Case No. _____

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

continuation sheets attached to Schedule of Codebtors

B6I (Official Form 6I) (12/07)

In re **Aaron Peterson
Dannielle Peterson**

Case No. _____

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): Daughter Daughter Son	AGE(S): 14 6 7
Employment:	DEBTOR	SPOUSE
Occupation	DISTRICT MANAGER	Flooring Sales Associate
Name of Employer	SPORTS AUTHORITY	Home Depot
How long employed	9 YEARS	3.5
Address of Employer	301 S. RT 59 AURORA, IL	621 Brook Forest Ave Shorewood, IL 60431

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$ 4,487.76	\$ 1,326.63
2. Estimate monthly overtime	\$ 0.00	\$ 0.00

3. SUBTOTAL

\$ 4,487.76	\$ 1,326.63
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4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
- b. Insurance
- c. Union dues
- d. Other (Specify): **401 k loan repay**

\$ 424.00	\$ 244.38
\$ 6.00	\$ 502.97
\$ 0.00	\$ 0.00
\$ 72.61	\$ 0.00
\$ 0.00	\$ 0.00

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ 502.61	\$ 747.35
------------------	------------------

6. TOTAL NET MONTHLY TAKE HOME PAY

\$ 3,985.15	\$ 579.28
--------------------	------------------

- 7. Regular income from operation of business or profession or farm (Attach detailed statement)
- 8. Income from real property
- 9. Interest and dividends
- 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above
- 11. Social security or government assistance (Specify):

\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00

- 12. Pension or retirement income
- 13. Other monthly income (Specify):

\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ 0.00	\$ 0.00
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15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$ 3,985.15	\$ 579.28
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16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

\$ 4,564.43

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Official Form 6J) (12/07)

In re Aaron Peterson
Dannielle Peterson Debtor(s) Case No. _____

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>0.00</u>
a. Are real estate taxes included? Yes <u> </u> No <u>X</u>		
b. Is property insurance included? Yes <u> </u> No <u>X</u>		
2. Utilities:		
a. Electricity and heating fuel	\$	<u>0.00</u>
b. Water and sewer	\$	<u>0.00</u>
c. Telephone	\$	<u>0.00</u>
d. Other _____	\$	<u>0.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>0.00</u>
4. Food	\$	<u>0.00</u>
5. Clothing	\$	<u>0.00</u>
6. Laundry and dry cleaning	\$	<u>0.00</u>
7. Medical and dental expenses	\$	<u>0.00</u>
8. Transportation (not including car payments)	\$	<u>0.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>0.00</u>
10. Charitable contributions	\$	<u>0.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>0.00</u>
b. Life	\$	<u>0.00</u>
c. Health	\$	<u>0.00</u>
d. Auto	\$	<u>0.00</u>
e. Other _____	\$	<u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) _____	\$	<u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	<u>0.00</u>
b. Other _____	\$	<u>0.00</u>
c. Other _____	\$	<u>0.00</u>
14. Alimony, maintenance, and support paid to others	\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home	\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>
17. Other _____	\$	<u>0.00</u>
Other _____	\$	<u>0.00</u>

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 0.00

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	<u>4,564.43</u>
b. Average monthly expenses from Line 18 above	\$	<u>0.00</u>
c. Monthly net income (a. minus b.)	\$	<u>4,564.43</u>

United States Bankruptcy Court
Northern District of Illinois

In re **Aaron Peterson**
Dannielle Peterson

Debtor(s)

Case No.
Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **56** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **December 28, 2009**

Signature **/s/ Aaron Peterson**
Aaron Peterson
Debtor

Date **December 28, 2009**

Signature **/s/ Dannielle Peterson**
Dannielle Peterson
Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Northern District of Illinois

In re **Aaron Peterson
Dannielle Peterson**

Debtor(s)

Case No.
Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$3,445.63	2009 WIFE Home Depot
\$13,902.69	2008 WIFE Home Depot
\$18,314.00	2007 WIFE Home Depot
\$20,194.92	2009 Husband The Sports Authority
\$53,366.03	2008 Husband The Sports Authority
\$61,376.08	2007 Husband The Sports Authority
\$1,319.47	2007 WIFE Pizza Hut

2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
--------	--------

3. Payments to creditors

None ☒ *Complete a. or b., as appropriate, and c.*

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Rancho Santa Fe Thrift & Loan Association, a foreign corporation, Plaintiff vs. Dannielle M. Tkaczyk (kna Dannielle Peterson) and Aaron Peterson,	Judgment	Chandler Justice Court Maricopa County, AZ	Garnishment

No. CV 04-06779 RA

- None ☐ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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5. Repossessions, foreclosures and returns

- None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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6. Assignments and receiverships

- None ☐ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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- None ☐ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

- None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

- None ☐ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Randolph M Gordon, Ltd. 220 W. Main St. P.O. Box 547 Morris, IL 60450	hyatt legal plan	895

10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
232 Juniper Lane Bolingbrook IL 60440-0000		Oct 2005 - Sept 2007

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18 . Nature, location and name of business

None

- ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
NAME				

None

- ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

19. Books, records and financial statements

None

- ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
------------------	-------------------------

None

- ☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
------	---------	-------------------------

None

- ☐ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
------	---------

None

- ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS	DATE ISSUED
------------------	-------------

20. Inventories

- None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
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- None ☐ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
-------------------	---

21. Current Partners, Officers, Directors and Shareholders

- None ☐ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
------------------	--------------------	------------------------

- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
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22. Former partners, officers, directors and shareholders

- None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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- None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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23. Withdrawals from a partnership or distributions by a corporation

- None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
---	-----------------------------------	--

24. Tax Consolidation Group.

- None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
----------------------------	--------------------------------------

25. Pension Funds.

- None ☐ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER (EIN)
----------------------	--------------------------------------

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date **December 28, 2009**

Signature **/s/ Aaron Peterson**
Aaron Peterson
Debtor

Date **December 28, 2009**

Signature **/s/ Dannielle Peterson**
Dannielle Peterson
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

United States Bankruptcy Court
Northern District of Illinois

In re **Aaron Peterson**
Dannielle Peterson

Debtor(s)

Case No.
Chapter

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: Marquette Cons/first I	Describe Property Securing Debt: Automobile
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date **December 28, 2009**

Signature **/s/ Aaron Peterson**
Aaron Peterson
Debtor

Date **December 28, 2009**

Signature **/s/ Dannielle Peterson**
Dannielle Peterson
Joint Debtor

United States Bankruptcy Court
Northern District of Illinois

In re **Aaron Peterson**
Dannielle Peterson

Debtor(s)

Case No.
 Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<u>895.00</u>
Prior to the filing of this statement I have received.....	\$	<u>0.00</u>
Balance Due.....	\$	<u>895.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify): **hyatt legal plan**

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: December 28, 2009

/s/ Randolph M. Gordon

Randolph M. Gordon
Randolph M Gordon, Ltd.
220 W. Main St.
P.O. Box 547
Morris, IL 60450
815-942-2554 Fax: 815-942-9212
rmgordonesq@sbcglobal.net

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Randolph M. Gordon
 Printed Name of Attorney
 Address:
220 W. Main St.
P.O. Box 547
Morris, IL 60450
815-942-2554
rmgordonesq@sbcglobal.net

X **/s/ Randolph M. Gordon** **December 28, 2009**
 Signature of Attorney Date

Certificate of Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Aaron Peterson
Dannielle Peterson
 Printed Name(s) of Debtor(s)

X **/s/ Aaron Peterson** **December 28, 2009**
 Signature of Debtor Date

Case No. (if known) _____

X **/s/ Dannielle Peterson** **December 28, 2009**
 Signature of Joint Debtor (if any) Date

**United States Bankruptcy Court
Northern District of Illinois**

In re **Aaron Peterson** Case No. _____
Dannielle Peterson Debtor(s) Chapter **7**

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: **210**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **December 28, 2009** **/s/ Aaron Peterson**
Aaron Peterson
Signature of Debtor

Date: **December 28, 2009** **/s/ Dannielle Peterson**
Dannielle Peterson
Signature of Debtor

A.C.S.I - Revenue Mangement Corp.
520 Main St. Suite 202
Waltham, MA 02452-5549

Advance Pay Systems, INC.
490 Wheeler Rd Suite 220
Hauppauge, NY 11788

AFNI
404 Brock Drive
Bloomington, IL 61702-3517

Afni, Inc.
404 Brock Drive
P.O. Box 3427
Bloomington, IL 61702-3427

AFNI, Inc.
404 Brock Drive
Bloomington, IL 61702-3427

AlliedInterstate
PO Box 361477
Columbus, OH 43236

Amercian Medical Collection Agency
PO Box 1235
Elmsford, NY 10523-0935

American Medical Collection Agencey
2269 S. Saw Mill River RD Bldg 3
Elmsford, NY 10523

Anasazi Medical Clinic PC
2525 W Beryl Ave
Phoenix, AZ 85201-1606

Anes Cons Of Morris LLC
PO Box 88271
Chicago, IL 60680-1271

Apache Juntion Justice Court
150 N Ocotillo Dr
Apache Junction, AZ 85220

APS
PO Box 2907
Phoenix, AZ 85062-2907

Arizona Children's Surgery P.C
PO Box 40487
Mesa, AZ 85274-0487

Arizona Public Service
Po Box 53999
Phoenix, AZ 85072

Arizona Public Service
Po Box 53999
Phoenix, AZ 85072

Arizona Public Services
Po Box 53999
Phoenix, AZ 85072

ARM accounts receivable management, Inc.
PO Box 129
Thorofare, NJ 08086-0129

Armor Systems Co
1700 Kiefer Dr
Suite 1
Zion, IL 60099

Armor Systems Corporation
2322 N Green Bay RD
Waukegan, IL 60087-4209

Assest Acceptance LLC
PO Box 2036
Warren, MI 48090-2036

Asset Acceptance LLC
San Antonio, TX

Associated Radiologists, LTD
PO Box 98311
Phoenix, AZ 85072

Associated Recovery Systems
P.O Box 469046
Escondido, CA 92046-9046

ATG Credit, LLC
PO Box 14895
Chicago, IL 60614-4523

Bank Of Amercia
100 N. Broadway
St. Louis, MO 63102-2738

BANNER BAYWOOD MED CENTER
P O BOX 6239
Mesa, AZ 85216-6239

C/O Credit Protection Assoc
PO Box 802068
Dallas, TX 75380-2068

Calvalry Portfolio services, LLC
PO Box 27288
Tempe, AZ 85285-7288

Calvary Portfolio Services
Attention: Bankruptcy Department
Po Box 1017
Hawthorne, NY 10532

Camelback Anesthesia
PO Box 81349
Phoenix, AZ 85069-1349

Camelback Anesthesia PLLC
PO Box 81349
Phoenix, AZ 85069-1349

Camelback Anesthesia PLLC
PO Box 81349
Phoenix, AZ 85069-1349

Cap One
Attn: C/O TSYS Debt Management
Po Box 5155
Norcross, GA 30091

Cbe Group
131 Tower Park Dr Suite 100
Waterloo, IA 50704

Cda/pontiac
Attn: Bankruptcy
Po Box 213
Sreator, IL 61364

Cda/pontiac
Attn: Bankruptcy
Po Box 213
Sreator, IL 61364

Cda/pontiac
Attn: Bankruptcy
Po Box 213
Sreator, IL 61364

Certegy Payment Recovery Services, Inc
3500 5th st
Northport, AL 35476

Certified Services Inc
PO Box 177
Waukegan, IL 60079-0177

Certified Services Inc
Po Box 177
Waukegan, IL 60079

Chandler Family Pract
1076 W. Chandler Blvd. # 113
Chandler, AZ 85225

Chandler Family Practice
1076 W. Chandler Blvd. #113
Chandler, AZ 85224

Chicago Osteopathic Healthcare
6715 Kingery HWY
Willowbrook, IL 60527-5141

City of Joliet Fire Department
150 West Jefferson Street
Joliet, IL 60432-4156

Clerk of the Superior Court
PO Box 53236
Phoenix, AZ 85072

Collection Company Of
700 Longwater Dr
Norwell, MA 02061

Collection service Bur
PO Box 310
Scottsdale, AZ 85252

Collection Service Bur
Po Box 310
Scottsdale, AZ 85252

Conseco Finance
Attn: Bankruptcy
P.O. Box 103106
Roswell, GA 30076

Cox Communications
PO Box 78071
Phoenix, AZ 85062-8071

Credit Control Corp
11821 Rock Landing Drive
Newport News, VA 23606

Credit Control Corp
11821 Rock Landing Dr
Newport News, VA 23606

Credit Management
4200 International Pwy
Carrolton, TX 75007

Credit Management Cont
Po Box 1654
Green Bay, WI 54305

Credit Management Control, INC
PO Box 1654
Green Bay, WI 54305-1654

CREDIT pROTECTION aSSOC
P O BOX 802068
Dallas, TX 75380-2068

Credit Protection Association, L.P
13355 Noel RD
Dallas, TX 75240

Creditors Discount & Aud
415 E Main St
Streator, IL 61364

Creditors Discount & Audit Co.
PO Box 213
415 E. Main St
Streator, IL 61364-0213

Creditors Discount & Audit CO.
415 E. Main ST
PO Box 213
Streator, IL 61364-0213

Creditors Discount & Audit Co.
P O Box 213
Streator, IL 61364

E R Solutions, Inc
500 SW 7th St. #A100
PO Box 9004
Renton, WA 98057

Edward Hospital & Health Services
PO Box 4207
Carol Stream, IL 60197-4207

Edward Hospital & Health Services
PO Box 4207
Carol Stream, IL 60197

Emcc, INC., Servicer of your Midland Cre
PO Box 9607
Manchester, NH 03108-9607

Emergency Physicians Professional Assoc
5001 West 80th st #300
Bloomington, MN 55437-1114

Epic Group, S.C.
PO Box 66973 Slot 303125
Chicago, IL 60666-0973

Epic Group, S.C.
PO Box 66973 Slot 303125
Chicago, IL 60666-0973

Epic Group, S.C.
PO Box 66973 Slot 303125
Chicago, IL 60666-0973

ER Solutions, Inc
PO Box 6030
Hauppauge, NY 11788-0154

First Financial Asset Management, INC.
PO Box 6887
Miramar Beach, FL 32550

First Premier Bank
Po Box 5524
Sioux Falls, SD 57117

GEMB / Mervyns
Attention: Bankruptcy
Po Box 103106
Roswell, GA 30076

Gemb/jcp
Attention: Bankruptcy
Po Box 103106
Roswell, GA 30076

Global Financial INC.
PO Box 5066
Timonium, MY 21094-5066

Grand Dental Associates, P.C.
3322 Solutions Center
Chicago, IL 60677-3003

Grant & Weber
14795 N 78th way ste 800
Scottsdale, AZ 85260

Grant & Weber
14795 N 78th way ste 800
Scottsdale, AZ 85260

Grant & Weber
14795 N 78th Way Ste 800
Scottsdale, AZ 85260

Grant & Weber
14795 N 78th Way Ste 800
Scottsdale, AZ 85260

Grant & Weber
14795 N 78th Way Ste 800
Scottsdale, AZ 85260

Grant & Weber
14795 N 78th Way Ste 800
Scottsdale, AZ 85260

Grant & Weber Arizona, Inc
14795 N 78th Way Suite 800
Scottsdale, AZ 85260

Grant & Weber Arizona, INC
14795 North 78th Way Suite 800
Scottsdale, AZ 85260

Grant & Weber Arizona, INC.
14795 North 78th Way Suite 800
Scottsdale, AZ 85260

Grant & Weber Arizona, INC.
14795 North 78th Way Suite 800
Scottsdale, AZ 85260

Grant & Weber Arizona, Inc.
14795 North 78th Way Suite 800
Scottsdale, AZ 85244

Grant & weber Arizona, Inc.
14795 N 78th Way Suite 800
Scottsdale, AZ 85260

Grundy Radiologists, INC.
PO Box 5997 Dept 7014
Carol Stream, IL 60197-5997

Grundy Radiologists, Inc.
PO Box 5997 Dept 7014
Carol Stream, IL 60197-5997

Hammerman & Hultgren PC
3101 North Central STE 500
Phoenix, AZ 85012

Harvard Collection Services, Inc.
4839 N. Elston Avenue
Chicago, IL 60635-2534

Healthcare Coll Inc
2432 W Peoria ave #4-10
Phoenix, AZ 85209

Healthcare Coll Inc
2432 W Peoria Ave # 4-10
Phoenix, AZ 85029

Healthcare Coll Inc
2432 W Peoria Ave # 4-10
Phoenix, AZ 85029

Healthcare Coll Inc
2432 W Peoria Ave # 4-10
Phoenix, AZ 85029

Healthcare Coll Inc
2432 W Peoria Ave # 4-10
Phoenix, AZ 85029

Healthcare Coll Inc
2432 W Peoria Ave # 4-10
Phoenix, AZ 85029

Healthcare Collections Inc.
P.O Box 82910
Phoenix, AZ 85071-2910

Healthcare Collections Inc.
PO Box 82910
Phoenix, AZ 85071

Healthcare Collections Inc.
PO Box 82910
Phoenix, AZ 85071-2910

Healthcare Collections Inc.
PO Box 82910
Phoenix, AZ 85071-2910

Heathcare Coll Inc
2432 W Peoria ave # 4-10
Phoenix, AZ 85209

Hidden Lakes Dental Care, P.C
680 W. Boughton Rd suite 100
Bolingbrook, IL 60440

HOWD Medical LLC
271 N. Main ST.
Seneca, IL 61360

Howd medical LLC
P O Box200
Seneca, IL 61360

HSBC Bank
PO Box 5253
Carol Stream, IL 60197

Illinois Amercian Water
PO Box 578
Alton, IL 62002-0578

Integrity Financial Partners, Inc
PO Box 11530
Overland Park, KS 66207-4230

J R Brothers Finance I
10000 N 31st Ave Ste D20
Phoenix, AZ 85051

Jason Buendgen
43 Foxcroft Road
Naperville, IL 60565

Jnr Adjustment Company
P.o. Box 27070
Minneapolis, MN 55427

JNR adjustment Company Inc
PO Box 27070
Minneapolis, MN 55427-0070

JR Brothers Finance INC
10000 N 31st Ave Ste D20
Phoenix, AZ 85051

KCRC
PO Box 30650
Salt Lake City, UT 84130-0650

Kenneth Eise
777 E Missouri Ave Ste 1
Phoenix, AZ 85014

Kenneth Eisen & Assoc
777 E Missouri Ave Ste 1
Phoenix, AZ 85014

Kenneth, Eisen & Associates, Ltd
PO Box 7370
Phoenix, AZ 85011-7370

Kenneth, Eisen & Associates, LTD
PO box 7370
Phoenix, AZ 85011-7370

La Fitness
1745 Route 59
Plainfield, IL 60586

LDC Collection Systems
PO Box 52030
Phoenix, AZ 85072-2030

LDC Collection Systems
PO Box 52110
Phoenix, AZ 85072-2110

LTD Financial Services, L.P.
7322 Southwest Freeway Suite 1600
Houston, TX 77074

M&M Orthopaedics LTD
4115 Fairview AVE
Downers Grove, IL 60515

Maricopa County Attorney
100 West Washington Street Suite 2000
Phoenix, AZ 85003-0014

Mark Gentile MD
908B W Chandler BLVD #4
Chandler, AZ 85225

Mark Gentile MD
908B W Chandler BLVD #4
Chandler, AZ 85225

Mark Gentile MD
908B W Chandler BLVD #4
Chandler, AZ 85225

Marquette Cons/first I
3033 Campus Dr Ste N150
Plymouth, MN 55441

Marquette Consumer Finance
3033 Campus Drive Ste N150
Plymouth, MN 55441

Marquette Consumer Finance
P.O. Box 5004
Westfield, IN 46074

Master Financial Group, INC.
PO Box 28317
Tempe, AZ 85285-8317

Medical Business Bureau, LLC
1175 Devin DR, STE 173
Norton Shores, MI 49441

Merchants Cr
223 W Jackson St
Chicago, IL 60606

Merchants Cr
223 W Jackson St
Chicago, IL 60606

Merchants Cr
223 W Jackson St
Chicago, IL 60606

Merchants Cr
223 W Jackson St
Chicago, IL 60606

Merchants Cr
223 W Jackson St
Chicago, IL 60606

Merchants Credit Guide Co.
223 W. Jackson BLVD
Chicago, IL 60606

Merchants Credit Guide Co.
223 W. Jackson BLVD
Chicago, IL 60606

Merchants Credit Guide Co.
223 W. Jackson BLVD
Chicago, IL 60606

Metro Inf. DIS. Consultants, LLC
500 E Ogden Ste C
Hinsdale, IL 60521-2480

Midland Cred
Po Box 6241
Sioux Falls, SD 57117

Midland Credit MGMT
8875 Aero Drive
San Diego, CA 92123

Midwest Ear, Nose & Throat Consultants,
503 Thornhill Drive
Carol Stream, IL 60188-2780

Miramed Revenue group LLC
Dept 77304
P O Box 77000
Detroit, MI 48277-0304

MiraMed Revenue Group, LLC
P.O Box 77000 Dept 77304
Detroit, MI 48277-0304

MiraMed Revenue Group, LLC
PO Box 536
Linden, MI 48451-0563

MiraMed Revenue Group, LLC
PO Box 536
Linden, MI 48451-0536

Miramed revenue Group, LLC
Dept 77304
P O Box 77000
Detroit, MI 48277-0304

Morris Hospital
150 West High Street
Morris, IL 60450

Morris Hospital
150 West High Street
Morris, IL 60450

Morris Hospital
150 West High Street
Morris, IL 60450

Morris hospital business office
150 W High Street
Morris, IL 60450-1497

Naperville Radiologists S.C.
6910 S Madison St
Willowbrook, IL 60527-5504

Naperville Radiologists S.C.
6910 S Madison ST
Willowbrook, IL 60527-5504

Naperville Radiologists S.C.
6910 S Madison St
Willowbrook, IL 60527

NCO Fin/99
PO Box 15636
Wilmington, DE 19850

NCO Financial Systems INC
PO Box 15630 Dept 99
Wilmington, DE 19850

NCO FInancial Systems Inc
PO Box 15740
Wilmington, DE 19850-5740

NCO Financial Systems Inc
PO Box 15740
Wilmington, DE 19850-5740

Newport News
Po Box 182124
Columbus, OH 43218

Nicor Gas
Attention: Bankruptcy Department
1844 Ferry Road
Naperville, IL 60507

Northland Group INC.
PO Box 390864
Edina, MN 55439

Omnium Worldwide, INC
PO Box 95684842
St. Louis, MO 63195

Pellettieri
991 Oak Creek Dr
Lombard, IL 60148

Penn Credit Corporation
PO Box 988
Harrisburg, PA 17108-0988

Peter analytis/Joliet Headache
801 North Larkin AVE suite 103
Joliet, IL 60435

Phillips & Cohen Associates, Ltd
258 Chapman RD Suite 205
Newark, DE 19702

Pinnacle Financial Group, INC.
7825 Washington Ave South Suite 410
Minneapolis, MN 55439

Progressive Medical Associates
PO Box 7127
Phoenix, AZ 85011

Pueblo Pediatrics LTD
2152 S. Vineyard
Mesa, AZ 85210

Quest Diagnostics
PO Box 64804
Baltimore, MD 21264-4804

Reliable Adjustment Bureau INC
2655 A Park Center Drive
Chandler, AZ 85225-1735

Revenue Production Management, INC
PO Box 673775
Detroit, MI 48267-3775

Revenue Production Management, Inc
PO Box 830913
Birmingham, AL 35283-0913

Revenue Production Management, Inc
PO Box 830913
Birmingham, AL 35283-0913

Revenue Production Management, Inc.
PO Box 830913
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